SYSTEMIC RACISM AND SUBSTANCE USE DISORDER: ANTI-RACIST STRATEGIES

Materials available: Slides, recording, and workbook

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SAMHSA Grant Slides for ORN: Working With Communities
The SAMHSA-funded Opioid Response Network (ORN) assists states, organizations and individuals by providing the resources and technical assistance they need locally to address the opioid crisis and stimulant use.

Technical assistance is available to support the evidence-based prevention, treatment and recovery of opioid use disorders and stimulant use disorders.

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The Opioid Response Network (ORN) provides local, experienced consultants in prevention, treatment and recovery to communities and organizations to help address this opioid crisis and stimulant use.

ORN accepts requests for education and training.

Each state/territory has a designated team, led by a regional Technology Transfer Specialist (TTS), who is an expert in implementing evidence-based practices.
CONTACT
THE OPIOID RESPONSE NETWORK
To ask questions or submit a request for technical assistance:
Call: 401-270-5900
Email: orn@aaap.org
www.opioidresponsenetwork.org
Create an environment for reflection, learning and engagement.

Share data, information, and experiences that reflect diverse research and lived experiences.

Reinforce that we are not experts and are learning with you. We are facilitating an ongoing conversation.
By the end of the session, participants will be able to:

- Review and define how racial inequities impact health outcomes.
- Review and define how racial inequities impact the delivery of our healthcare services.
- Review and analyze how racial inequities relate to substance use and substance use disorder (SUD) historically and now.
- Assess how systems of oppression and privilege impact SUD treatment delivery.
- Describe Hay’s ADDRESSING model and assess the implications for your professional life.
- Discuss real world implications of racism for people in recovery.
- Outline individual action steps for being anti-racist.
- Outline anti-racism organizational steps.
- Outline leadership strategies for addressing racial equity.
- Know how to access resources to support racial equity capacity building.
Recap: Health Disparities Data (Impact of Pandemic)

COVID-19 is disproportionately impacting black, indigenous, and people of color (BIPOC) communities and increasing mental health and substance use disorder (SUD) challenges.

- Latinx adults reporting a higher prevalence of psychosocial stress related to not having enough food or stable housing than adults in other racial and ethnic groups (McKnight-Eily et al. 2021)

- EHR data across 50 states shows African Americans with COVID-19 and SUD had worse outcomes (death: 13.0%, hospitalization: 50.7%) than Caucasians (death: 8.6%, hospitalization: 35.2%) (Wang et al., 2021)

- Existing stressors, social isolation, and economic deprivation disproportionately impact black, indigenous and people of color (BIPOC) communities and potentially contribute to increased substance use (Khatri et al. 2021)

- 2020-2021 Philadelphia data on all overdoses showed 52% increase in black communities (compared to 23% decreases in non-Latinx white communities); fatal overdoses were also higher (Khatri et al., 2021)
Recap: Racial Disparities in Treatment for Opioid Use Disorder

Racial disparities in overall MOUD access are a significant feature of the current addiction treatment landscape (Nguemeni et al., 2021)

Among patients who experience non-fatal overdoses, Black patients are half as likely to obtain follow-up appointments for OUD care after discharge from the emergency room (Kilaru et al., 2020)

Racial segregation predicts differences in access to both methadone and buprenorphine (Goedel et al., 2020)

Increased uptake of buprenorphine as an OUD treatment, but remains primarily accessible to white people, and to people who are beneficiaries of employer-based insurance (Roberts et al., 2018)
Recap: Racial Disparities Related to Criminal Justice

Criminal justice system shows dramatical over-representation of racial and ethnic minorities.

2017: Black and African American men and women represented 12 percent of the adult population in the United States but 33 percent of the sentenced prison population; White people accounted for 64 percent of adults overall but only 30 percent of prisoners; and Latinx represented 16 percent of the general adult population, and 23 percent of the incarcerated population.

People with mental and substance use disorders are incarcerated at a staggering high rate and overrepresented on probation and parole.

Racial disparities in behavioral health diagnosis and treatment are contributing to the disproportionately high number of people behind bars and under correctional supervision.
Video: Michelle Alexander

• IS MASS INCARCERATION THE NEW JIM CROW?
Workbook exercise 1:
Reflect on the video by Michelle Alexander

- How does Michelle Alexander connect Jim Crow and mass incarceration?
- What are the implications of mass incarceration for public health?

Pause video to reflect.
Recap: Critical Race Theory (CRT)

- Critical race theory examines social, cultural and legal issues as they relate to race and racism.
- Racism is systemic and institutional (not just individual).
- Intersectionality is key concept.
- CRT being challenged in many states and school systems in 2021.
Recap: Structural Racism

• Structural racism refers to the “Totality of ways in which societies foster racial discrimination through mutually reinforcing systems of housing, education, employment, earnings, benefits, credit, media, health care, and criminal justice” (Bailey et al., 2017)
Recap: Cultural Humility

The National Institutes of Health (NIH) defines cultural humility as “a lifelong process of self-reflection and self-critique whereby the individual not only learns about another's culture, but one starts with an examination of her/his own beliefs and cultural identities.”

Cultural Humility Principles

1. Lifelong commitment to learning and critical self-reflection
2. Desire to fix power imbalances within provider-client dynamic
3. Institutional accountability & mutual respectful partnership based on trust
Recap: Myths about Race and Racism

- "Race is biological"
- "I don’t see color"
- "It’s poverty, not race"
- "Race vs. racism vs. racist"
Recap: Systems of Oppression and Privilege

Where do you experience privilege and/or power?

Where do you experience oppression and/or marginalization?

How do systems of privilege and oppression interact?

How do you use your privilege?
<table>
<thead>
<tr>
<th>Recap: How Do Social Determinants of Health Show Up In Substance Use Disorder?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barriers to prevention?</td>
</tr>
<tr>
<td>Barriers to care?</td>
</tr>
<tr>
<td>Engagement and retention in treatment?</td>
</tr>
<tr>
<td>Barriers to recovery?</td>
</tr>
</tbody>
</table>
Recap: Drug Policy and Systemic Racism

- De-medicalization (from medicalization to criminalization)
- Criminal legal reform failures
- Selective and discriminatory recognition of addiction as a medical condition
- Inequitable expansion of treatment
- Neglect of BIPOC communities' health concerns (flavored tobacco; alcohol outlet density)
- Overcriminalization and disparate policing
Recap of Video

(Jay Z): The War on Drugs
LIVED EXPERIENCE
Workbook exercise 2:
Reflect on the examples of lived experience

● *In what ways does structural racism show up in these examples of lived experience?*

*Pause video to reflect.*
ANTI-RACIST STRATEGIES
INDIVIDUAL ACTIONS
WHY ANTI-RACIST?

“You don’t need to be free of racism to be an anti-racist. Anti-racism is the commitment to fight racism wherever you find it, including in yourself. And it’s the only way forward.”

— So You Want to Talk About Race, Ijeoma Oluo
Fear and the Myth of the Zero-Sum Game

- Myth of equity resulting in loss as resources are limited
  - Divide and conquer hurts us all
- White people missing critical information from young age
  - Why is it so hard to talk about race?
- Narrative of zero-sum game perpetuated by elite
  - Helps elite avoid accountability
Workbook exercise 3:
Reflect on the concept of the zero-sum game

- Do you find it hard to talk about race?
- How does this fear and the myth of the zero-sum game resonate with you?

Pause video to reflect.
How can I be anti-racist?

- Process of reflective self-inquiry and cultural humility
- “Be the change” and be willing to “do the work”
- See the systems and programming
  - How have these systems impacted you?
  - How have they impacted people of color?
- Act by supporting anti-racist policies and ideas
Get out of denial! See your bias; what is your default? (Implicit association)

Stare at awesome black people: Helps dissociate the association in our biased brains; reset.

Move toward black people! Who is in your circle and who is missing?

Walk toward your discomfort. Build relationships and compassion.

Take a stand and embrace courage!

Speak out, speak up and challenge racism when you hear it.

Call to Action: Individual (Verna Myers)
Workbook exercise 4: Reflect on your own experiences around race

- How do racist ideas impact your personal life?
- How do racist ideas impact your professional life?

Pause video to reflect.
Educate yourself!
# Individual: Reading Recommendations

<table>
<thead>
<tr>
<th>Book Title</th>
<th>Author(s)</th>
<th>Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>How To Be an Antiracist (Ibram X. Kendi)</td>
<td>Ibram X. Kendi</td>
<td>2019</td>
</tr>
<tr>
<td>Four Hundred Souls</td>
<td>Ibram X. Kendi (editor); multiple authors</td>
<td>2021</td>
</tr>
<tr>
<td>I’m Still Here</td>
<td>Austin Channing Brown</td>
<td>2018</td>
</tr>
<tr>
<td>The New Jim Crow</td>
<td>Michelle Alexander</td>
<td>2010</td>
</tr>
<tr>
<td>Medical Apartheid</td>
<td>Henrietta A. Washington</td>
<td>2006</td>
</tr>
<tr>
<td>Between the World and Me</td>
<td>Ta-Nehisi Coates</td>
<td>2015</td>
</tr>
<tr>
<td>Unpacking the Knapsack</td>
<td>Peggy McIntosh</td>
<td>1989</td>
</tr>
<tr>
<td>The Sum of Us</td>
<td>Heather McGhee</td>
<td>2021</td>
</tr>
<tr>
<td>White Fragility</td>
<td>Robin DiAngelo</td>
<td>2018</td>
</tr>
</tbody>
</table>
VERNA MYERS: How to overcome our biases? Walk boldly toward them (2014)

IBRAM KENDI: The difference between being "not racist" and antiracist, 2020 TED Talk

AUSTIN CHANNING BROWN: The Next Question show (expanding racial justice); ongoing.
Podcast Recommendations

- Be Antiracist with Ibram X. Kendi
- Austin Channing Brown I’m Still Here
- White Lies by NPR
- The 1619 Project by the New York Times
- Uncivil by Gimlet Media
- Pass the Mic by The Witness Podcast Radio
- Seeing White by Scene On Radio
TV Show and Movie Recommendations

- The United States vs. Billie Holliday
- 13th
- Judas and the Black Messiah
- When They See Us (Central Park 5)

Look for black-led works where directors, writers, and producers tell you about the black experience!
Bring this into your home and work!
The ADDRESSING Framework

**Cultural Influences**
- Age/generational
- Developmental disabilities
- Disabilities acquired
- Religion & Spirituality
- Ethnic & racial identity
- Socioeconomic status
- Sexual orientation
- Indigenous heritage
- National origin
- Gender

**Minority Groups**
- Children, adolescents, elders
- People with developmental disabilities
- People with disabilities acquired later in life
- Religious minority cultures
- Ethnic & racial minority cultures
- People of lower status by educ, income, occup, rural habitat
- Gay, lesbian, & bisexual people
- Indigenous/Aboriginal/Native people
- Refugees, immigrants, international students
- Women, transgender people
### Example of ADDRESSING Model

#### Hays ADDRESSING Model Template

<table>
<thead>
<tr>
<th>Cultural Group (according to the ADDRESSING model)</th>
<th>How You Identify</th>
<th>Implications for your work. Consider where you have privilege, and which groups might be easy or difficult to work with.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Age (and generational influences)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Disability (developmental)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Disability (acquired)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H. Religion and spiritual identity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E. Ethnicity and racial identity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S. Socioeconomic status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S. Sexual orientation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I. Indigenous heritage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M. National origin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Gender</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

After filling out the table above, review your entries. Then use the space below and respond to the following:

1. Based on your entries to the table above, evaluate three areas where you have privilege and three areas where you do not (this is also part of the first discussion in the course). Provide examples of each.
2. Evaluate how your own cultural identities or other factors may possibly influence you to have any biases in relation to others with different cultural identities.
3. Analyze the implications your cultural identifications may have on your professional relationships.

#### Partially Completed Example

| Cultural Group (according to the ADDRESSING model) | How You Identify | Implications for your work. Consider where you have privilege, and what groups might be easy or difficult to work with.
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Age (and generational influences)</td>
<td>Middle age (40s)</td>
<td>I would have difficulty working with children and young adults (15–20). I realize I'm too verbal in my therapy approach, and appreciate clients who can have discussions involving complex concepts.</td>
</tr>
<tr>
<td>D. Disability (developmental)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Disability (acquired)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H. Religion and spiritual identity</td>
<td></td>
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</tr>
<tr>
<td>E. Ethnicity and racial identity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S. Socioeconomic status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>S. Sexual orientation</td>
<td>Gay</td>
<td>I know I have biases against people who follow a strict and literal interpretation of the scriptures.</td>
</tr>
<tr>
<td>I. Indigenous heritage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M. National origin</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Gender</td>
<td>Male</td>
<td>I would have problems working with those who follow strict social sex roles. Only men can do men things and only women can do women things. I find gender and social sex roles much more fluid.</td>
</tr>
</tbody>
</table>

Workbook exercise 5:
Review the ADDRESSING model, complete the table and respond to the questions. Reflect on the following:

- What examples of privilege and bias did you identify?
- What are the implications for your work?

Pause video to reflect.
Go Deeper!

This is a lifelong process

Get comfortable being uncomfortable

Seek out trainings and ways to engage in “doing the work”

Bring this into your work, family and friend circles
ORGANIZATIONAL AND LEADERSHIP ACTIONS
How do we integrate racial equity effectively?

• Prepare for change
  • Build your implementation team; gain buy-in from leadership

• Assess, plan and build readiness
  • Racial equity assessment; power analysis

• Build workforce capacity
  • Training, ongoing leadership support, protocols and policies

• Ongoing measurement and evaluation

• Funding and sustainability

• Hint: This is going to take time!
All organizations and leaders should be doing this!
“Because advancing equity requires a systematic approach to embedding fairness in decision-making processes, executive departments and agencies must recognize and work to redress inequities in their policies and programs that serve as barriers to equal opportunity.” - Executive Order 13985, January 20, 2021

KEY PRINCIPLES
Three key principles should ground agency activities pursuant to EO 13985:

• Advancing equity must be a core part of management and policy making processes. Achieving equity must go beyond delivering special projects or programs that focus on underserved communities. Equity must be a central component of the decision-making framework that all agency functions are routed through.

• Successful equity work yields tangible changes that positively impact American lives. Equity is not just a set of values; it must also be a set of tangible outcomes.

• Equity benefits not just some of us, but all Americans. If we close the gaps in income, wealth, and financial security for families across the country, our economy will grow. It is up to all of us as leaders to carry this message, and to demonstrate that advancing equity is not a zero-sum game that benefits some communities at the expense of others.
EXAMPLES OF LEADERSHIP ACTION
How to be an anti-racist leader

Lead the way
- Model the change and do the work

Invest
- Invest in diversity at your organization

Diversify leadership
- Promote and elevate BIPOC employees

Analyze policies
- Re-examine organizational policies and procedures

Recruit
- Recruit and hire staff to reflect the client population
• Like you are investing in this training! Putting actual, substantial resources towards racial justice and equity

• Training on an ongoing basis. Once per year or more? What do you think? Are these trainings required?

Invest in diversity!
Promote and elevate BIPOC employees

• Assess your organizational context and staffing
• Diversify the decision-making roles to better serve clients
• Assess pathways to leadership
Re-examine company policies and practices

Review
Review policies for microaggressions (e.g., hair, “professional appearance”)

Foster
Foster a culture of inclusivity and promotion
- Analyze messaging
- Create a culture/safe space for all staff (to challenge (without repercussions)
- Enforce strict anti-racism policies
Recruit and hire staff to reflect the population

Assess how your staff reflects your community/client/patient population

Keep data on recruitment and hiring practices-make outreach look different!

Equity vs. equality
Questions leaders could ask

- Does the demographic makeup of our staff reflect those we serve?
- Are we assessing the organizational climate and staff sense of belonging/community?
- Are we actively investing in leadership pathways for under-represented and/or BIPOC staff?
- How are we addressing social determinants of health such as food and housing insecurity in our programs?
Workbook exercise 6:
Reflect on the following:

- What questions are you asking as a leader?
- What questions could you be asking?

Pause video to reflect.
ORGANIZATIONAL SHIFTS
Shifting Toward an Anti-Racist Organization: Key Steps

**Acknowledge**
- Acknowledge systemic racism within the workplace, from individual workers to leadership.

**Assess**
- Assess how racial inequity and wealth inequality may impact clients/patients/staff.

**Use**
- Use this critical assessment to examine where the organization can actively make existing systems of oppression more equitable.

**Include**
- Include ongoing measurement to assess changes.
Shifting Toward an Antiracist Organization

Key areas:

- Developing a mission statement that reflects a commitment to diversity
- Examine hiring practices
- Benefits and work conditions
- Assessments and promotions
- Meetings and social connection
- Data to reflect progress and areas needing improvement
- Diversity and inclusion department with the authority and resources to implement changes
Organizational strategies you can (quickly) implement!

• Disaggregate data
• Create a culturally relevant and diverse workforce.
• Expand professional development opportunities and build racial equity capacity
• Incorporate cultural values, such as spirituality, into treatment practices
• Employ culturally specific outreach and engagement strategies
Commit to Action!

What are you prepared to do?

Individually?

In your workplace?

In your role as leader/champion?
Workbook exercise 7:
Reflect on all the strategies shared at the individual, leadership and organizational level.

- What are you committed to doing?
- What are the implications for your work? What are you prepared to do individually, in your role as champion/leader, or at the organizational level?

Pause video to reflect.
Submit a request so we can support you!
Jennifer Bronson, and Marcus Berzofsky, Indicators of Mental Health Problems Reported by Prisoners and Jail Inmates, 2011-12, report NCJ 250612 published by the U.S. Bureau of Justice Statistics, June 2017;